

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

MASS PAC

ADDRESS (number and street)

PO BOX 440324

☐Check if different
than previously
reported. (ACC)

SOMERVILLE

MA

02144

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00417295

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 0

0 1

2 0 0 7

through

1 2

3 1

2 0 0 7

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Brian M Mount

Signature of Treasurer

Electronically Filed by Brian M Mount

Date

0 1

2 2

2 0 0 8

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
MASS PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		17802.76
(b) Cash on Hand at Beginning of Reporting Period	42663.73	
(c) Total Receipts (from Line 19)	25276.79	60279.03
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	67940.52	78081.79
7. Total Disbursements (from Line 31)	9384.09	19525.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	58556.43	58556.43
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

MASS PAC

Report Covering the Period:

From:

M M
1 0D D
0 1Y Y Y Y
2 0 0 7

To:

M M
1 2D D
3 1Y Y Y Y
2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	6750.00	22750.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	6750.00	22750.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	18500.00	37500.00
(c) Other Political Committees (such as PACs)	25250.00	60250.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	26.79	29.03
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	25276.79	60279.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	25276.79	60279.03

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	4384.09	12025.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	4384.09	12025.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	2500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	9384.09	19525.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9384.09	19525.36

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	25250.00	60250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25250.00	60250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4384.09	12025.36
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4384.09	12025.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MASS PAC

A.

Full Name (Last, First, Middle Initial)

William Clyburn

Mailing Address 7819 12th St., NW

City

Washington

State

DC

Zip Code

20012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information requested

Occupation
letter sent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.4519

Amount of Each Receipt this Period

500.00

contribution

B.

Full Name (Last, First, Middle Initial)

Joseph Dowley

Mailing Address 1900 K St., NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C

Name of Employer
McKenna, Long and Aldrich

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.4511

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Ronnie Flippo

Mailing Address 400 Marian Way

City

Florence

State

AL

Zip Code

35634

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requested

Occupation
letter sent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.4521

Amount of Each Receipt this Period

1000.00

contribution

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MASS PAC

A.

Full Name (Last, First, Middle Initial)

Steven T Glaze

Mailing Address 324 E St., NE

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Letter Sent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.4513

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Edgar Jenkins

Mailing Address 5 Fox Run Place
PO Box 70

City

Jasper

State

GA

Zip Code

30143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information requested

Occupation
letter sent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.4515

Amount of Each Receipt this Period

1000.00

contribution

C.

Full Name (Last, First, Middle Initial)

Calvin P Johnson

Mailing Address 600 13th St. NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer
McDermott, Will and Emery

Occupation
Legislative Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.4508

Amount of Each Receipt this Period

250.00

contribution

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MASS PAC

A.

Full Name (Last, First, Middle Initial)

David A Rudd

Mailing Address 3846 Macomb St., NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requested

Occupation
letter sent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.4517

Amount of Each Receipt this Period

1000.00

contribution

B.

Full Name (Last, First, Middle Initial)

John P. Winburn

Mailing Address 801 PA Ave. NW
Suite 730

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Palmetto Group

Occupation
Gov't Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.4510

Amount of Each Receipt this Period

1000.00

contribution

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

6750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 18

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MASS PAC

A.

Full Name (Last, First, Middle Initial)

AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 Massachusetts Ave. NW
8th Floor

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C C00035451

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 7

Transaction ID: SA11C.4497

Amount of Each Receipt this Period

2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 1050 31st Street N.W.

City State Zip Code
Washington DC 20007

FEC ID number of contributing
federal political committee.

C C00024521

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: SA11C.4488

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF PENSION PROFESSIONALS & ACTUARIES PAC

Mailing Address 4245 N Fairfax Drive
Suite 750

City State Zip Code
Arlington VA 22203

FEC ID number of contributing
federal political committee.

C C00333104

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: SA11C.4490

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 10 / 18

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MASS PAC

A.

Full Name (Last, First, Middle Initial)
BROTHERHOOD OF LOCOMOTIVE ENGINEERS AND TRAINMEN PAC FUND

Mailing Address 1370 Ontario St

City State Zip Code
Cleveland OH 44113

FEC ID number of contributing
federal political committee. **C** C00099234

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA11C.4505

Amount of Each Receipt this Period

2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS COMMITTEE ON POLITICAL EDUCATION

Mailing Address 900 Seventh St. N.W.

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: SA11C.4494

Amount of Each Receipt this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1500 K Street NW
Suite 375

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee. **C** C00009282

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA11C.4503

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 18

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MASS PAC

A.

Full Name (Last, First, Middle Initial)
PARSONS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 100 West Walnut Street
T-1110

City State Zip Code
Pasadena CA 91124

FEC ID number of contributing
federal political committee. **C** C00103549

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: SA11C.4495

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
POLITICAL EDUCATIONAL FUND OF THE BUILDING AND CONSTRUCTION TRADES DEPARTMENT

Mailing Address 815 16th St. NW Suite 600

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee. **C** C00003160

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: SA11C.4486

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
SEAFARERS POLITICAL ACTIVITY DONATION-SEAFARERS INTERNATIONAL UNION OF N.A.-AGLW

Mailing Address 5201 Auth Way

City State Zip Code
Camp Springs MD 20746

FEC ID number of contributing
federal political committee. **C** C00004325

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 7

Transaction ID: SA11C.4499

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 18

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MASS PAC

A.

Full Name (Last, First, Middle Initial)

SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE

Mailing Address 1750 New York Avenue NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C C00007542

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11C.4501

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

18500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MASS PAC

A. Full Name (Last, First, Middle Initial) BEBO Trattoria, Inc.	Transaction ID: SB21B.4532 Date of Disbursement																				
Mailing Address 2250 Crystal Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	5		2	0	0	7												
City Arlington State VA Zip Code 22202	Amount of Each Disbursement this Period																				
Purpose of Disbursement meals	<table border="1"> <tr> <td>1</td><td>4</td><td>5</td><td>.</td><td>3</td><td>6</td> </tr> </table>	1	4	5	.	3	6														
1	4	5	.	3	6																
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Chase Card Services	Transaction ID: SB21B.4527 Date of Disbursement																				
Mailing Address PO Box 15153	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	5		2	0	0	7												
City Wilmington State DE Zip Code 19886-5153	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card charges	<table border="1"> <tr> <td>3</td><td>8</td><td>1</td><td>.</td><td>9</td><td>5</td> </tr> </table>	3	8	1	.	9	5														
3	8	1	.	9	5																
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Chase Card Services	Transaction ID: SB21B.4539 Date of Disbursement																				
Mailing Address PO Box 15153	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	8		2	0	0	7												
City Wilmington State DE Zip Code 19886-5153	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card charges	<table border="1"> <tr> <td>8</td><td>6</td><td>7</td><td>.</td><td>1</td><td>4</td> </tr> </table>	8	6	7	.	1	4														
8	6	7	.	1	4																
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1249.09

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MASS PAC

A.

Full Name (Last, First, Middle Initial)
Greater Boston Management Co.

Mailing Address 404 S. huntington Ave

City State Zip Code
Jamaica Plain MA 02130

Purpose of Disbursement
Rent/Utilities

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4507

Date of Disbursement

10 / 11 / 2007

Amount of Each Disbursement this Period

400.00

B.

Full Name (Last, First, Middle Initial)
Greater Boston Management Co.

Mailing Address 404 S. huntington Ave

City State Zip Code
Jamaica Plain MA 02130

Purpose of Disbursement
Rent/Utilities

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4526

Date of Disbursement

11 / 05 / 2007

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)
Greater Boston Management Co.

Mailing Address 404 S. huntington Ave

City State Zip Code
Jamaica Plain MA 02130

Purpose of Disbursement
Rent/Utilities

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4537

Date of Disbursement

12 / 18 / 2007

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MASS PAC

A.

Full Name (Last, First, Middle Initial)
Greater Boston Management Co.

Mailing Address 404 S. huntington Ave

City State Zip Code
Jamaica Plain MA 02130

Purpose of Disbursement
Rent/Utilities

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4538

Date of Disbursement

12 / 18 / 2007

Amount of Each Disbursement this Period

400.00

B.

Full Name (Last, First, Middle Initial)
National Democratic Club

Mailing Address 30 Ivy St., SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement
meals/entertainment

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4531

Date of Disbursement

11 / 05 / 2007

Amount of Each Disbursement this Period

236.59

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
National Democratic Club

Mailing Address 30 Ivy St., SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement
meals/entertainment

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4541

Date of Disbursement

12 / 18 / 2007

Amount of Each Disbursement this Period

262.44

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MASS PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) National Democratic Club</p> <p>Mailing Address 30 Ivy St., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement meals/entertainment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4542</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 2</div> <div>1 8</div> <div>2 0 0 7</div> </div> </p> <p>Amount of Each Disbursement this Period <div>111.25</div> </p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) National Democratic Club</p> <p>Mailing Address 30 Ivy St., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4543</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 2</div> <div>1 8</div> <div>2 0 0 7</div> </div> </p> <p>Amount of Each Disbursement this Period <div>34.88</div> </p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) National Democratic Club</p> <p>Mailing Address 30 Ivy St., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement meals/entertainment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4544</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 2</div> <div>1 8</div> <div>2 0 0 7</div> </div> </p> <p>Amount of Each Disbursement this Period <div>222.57</div> </p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MASS PAC

A.

Full Name (Last, First, Middle Initial)
Lisa Scala

Mailing Address 241 Boston ST
#2

City State Zip Code
Dorchester MA 02125

Purpose of Disbursement
consultant - fundraiser

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4534

Date of Disbursement

11 / 08 / 2007

Amount of Each Disbursement this Period

1250.00

B.

Full Name (Last, First, Middle Initial)
United States Postal Service

Mailing Address Fort Point Station

City State Zip Code
Boston MA 02205-9761

Purpose of Disbursement
postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4540

Date of Disbursement

12 / 18 / 2007

Amount of Each Disbursement this Period

236.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

4099.09

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 / 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MASS PAC

A.

Full Name (Last, First, Middle Initial)

OHIO DEMOCRATIC PARTY

Mailing Address 340 East Fulton Street

City
ColumbusState
OHZip Code
43215Purpose of Disbursement
contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.4535

Date of Disbursement

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00